

FOREIGN BODY URETHRITIS*

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Urethritis due to foreign bodies, though rare, is a well-known clinical entity, and a study of the literature reveals how varied are the types of foreign bodies which have been introduced within the urethra; since 1946 three cases of foreign body urethritis have been seen at this special clinic.

The first patient was a middle-aged man with a mucopurulent discharge due to his having introduced newspaper into the urethra in tiny rolls.

The second patient was a young mentally-deficient man who presented with a purulent urethral discharge which smelled of orange. Examination revealed orange peel, collar studs, and a collar stiffener inside the urethra.

The third patient, a married man aged 30, was referred to the special clinic on September 11, 1961, for investigation of an urethral discharge of 6 days' duration.

History.—The patient's story was as follows: While on holiday in a village in France, he got up one morning with an urgent desire to relieve himself. He rushed to the neighbouring field which was full of long grass. During the act of defaecation a long piece of grass accidentally entered through the erect penis! In an endeavour to pull it out he broke the stalk, leaving a substantial portion

inside the urethra. When he left France 2 days later the grass was still inside the urethra causing burning during urination. On the third day he developed an urethral discharge associated with burning and frequency. He was afebrile. He denied extra-marital intercourse, the last marital coitus being one day before the incident.

He went to his own doctor, who apparently disbelieved his story and referred him to the casualty department where a straight x ray of the lower urinary tract revealed no abnormality. He was then referred to the Special Clinic.

Examination.—There was a frankly purulent urethral discharge with slight meatitis. No grass could be seen with the naked eye nor palpated along the urethra; urethral smears showed numerous pus cells but no organisms. The urine was moderately hazy with a trace of albumin and a fair amount of pus. Urethroscopy revealed a coiled piece of grass, which was still green, situated near the bulbous urethra. By gentle manipulation of the cannula the end of the stalk was grasped and the grass gradually withdrawn from inside the urethra. The stalk measured 9 in. (22·9 cm.) in length (Figure).

Treatment.—Mist.pot.cit. with Tr.hyoscyami was prescribed and we believe that the patient made a satisfactory recovery as he did not attend the clinic again in spite of repeated reminders.

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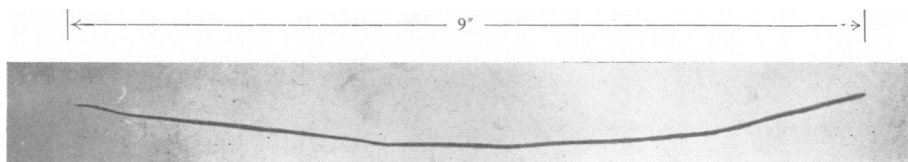


Figure.—Grass stalk 9 in. in length.

Discussion

Poulet (1880) has given a long list of foreign bodies found in the urethra which includes pins, pencils, penholders, pieces of whale bone, shoe makers' awls, pipe stems, hairpins, crochet hooks, matches, fir twigs, pieces of wire, straws, fish bones, pebbles, beans, peas, grape seeds, fruit stones, bits of bone, splinters of wood, clasps, hooks, a needle case, and heads of garlic.

Other causes of foreign body urethritis which may be mentioned are fragments of surgical instruments such as catheters, bougies, glass tubes, pieces of nitrate of silver, and the cannula of a syringe (Herman, 1938).

Oraison (1922) reported clinical thermometers as a cause of foreign body urethritis. Riley (1938) described a patient with multiple sclerosis who had introduced three pairs of tissue forceps into the urethra with the closed ends foremost. Stabler (1946) reported a case of urethritis due to two nails introduced by the patient and removed by external urethrotomy 12 years after. Gordon (1941) described the autopsy findings of a mentally-defective patient who died of peritonitis presumably following perforation of the bladder by a pin introduced from outside. Over a dozen safety pins were recovered from the bulbous and proximal portions of the urethra which formed a bladder-like cavity.

Behind the urge to introduce foreign bodies into the urethra lies an abnormal erotic impulse, or a neurotic or a psychotic mind. Urethral masturbation by introduction of foreign bodies, usually hair pins, is not uncommon in girls.

The diagnosis of foreign body urethritis depends mainly on the history. Sometimes the object can be seen with the naked eye or can be palpated. Rectal examination may be helpful. Roentgenography should include antero-posterior and lateral views. Urethroscopy in adults often clinches the diagnosis. The calibre of the juvenile urethra does not permit satisfactory endoscopy. The foreign body may move into the bladder, or may remain impacted within

the urethra indefinitely causing mild or severe symptoms, or may be expelled spontaneously. Spontaneous expulsion is however rare, and it is usually necessary to remove the foreign body. Simple manipulation is occasionally sufficient. Endoscopic removal can be achieved in adults, but in juveniles the calibre of the urethra renders this method unlikely. Urethrotomy may have to be undertaken in long-standing cases or when peri-urethral suppuration exists.

After the removal of the foreign body the urethritis usually subsides rapidly, but stricture is a possible sequel, so that periodic examination may be necessary for a considerable time.

Summary

A case of urethritis due to a stalk of grass which entered the urethra accidentally is described and two previous cases are also mentioned; the literature is briefly surveyed.

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Urétrite causé par un corps étranger

RÉSUMÉ

On rapporte un cas d'urétrite dû à un brin d'herbe qui s'introduit par hasard dans l'urètre. Deux cas précédents sont décrits avec une brève revue de la littérature.